Approved For Release 2002/01/28 : CIA-RDP76M00527R000700150088-2 S 19978 CONGRESSIONAL RECORD—SENATE November 25, 1974

The subcommittee staff then undertook to determine whether the information required under the two programs constituted an invasion of the privacy of

participating patients.

I am pleased to report that the Federal agencies involved here, the Special Action Office for Drug Abuse Prevention and the Drug Enforcement Administration, responded commendably to the subcommittee's inquiry. Both agencies ultimately decided to drop most of the data requirements from the survey which could theoretically have been used to identify drug abuse patients.

I would point out as well that the subcommittee did not discover any evidence that information collected in the course of the surveys was ever misused. But that possibility at least existed prior to the

recent shifts in policy.

I think this particular inquiry of the subcommittee indicates how Congress could and should perform its oversight function. Here, the subcommittee identified certain features of Federal programs which appeared to infringe upon the privacy of those citizens who were uninformed participants. Once the agencies reconsidered, they decided that they could get along without the objectionable information after all. Their data-gathering continues, but a small blow had been struck for better, less obtrusive Government.

Former Justice Louis D. Brandels wrote in 1928:

Experience should teach us to be most on our guard to protect liberty when the Government's purposes are beneficent. Men born to freedom are naturally alert to repel invasion of their liberty by evil-minded rulers. The greatest dangers to liberty lurk in insidious encroachment by men of zeal, well-meaning but without understanding.

If there is one thing we have learned over the last several years, it is that there are many well-meaning men in government who lack understanding. We in the Congress cannot always accept their actions and their assurances at face value. We must keep open minds and we must not fear to challenge what we perceive as dangerous to our rights and liberties.

This small subcommittee report was one such challenge. The investigation did not uncover anything particularly shocking, nor did it result in very substantial change. But it did preserve just a bit more of the privacy of drug abuse patients than they might otherwise have had. Freedom is lost by inches, not miles, and I think we have gained back some ground here.

The report is available from the subcommittee office or can be purchased at the Government Printing Office at a cost of \$0.65.

NATIONAL HEALTH INSURANCE: THE RIGHT OF EVERY AMERI-CAN

Mr. HARTKE. Mr. President, for the past several years, I have urged Congress to adopt a national health insurance program because I believe that every American has the right to quality health care. It now appears that the 94th Congress

may be willing to adopt such a program. In order that my views on the substance of national health insurance be known, I ask unanimous consent that the text of an address I delivered before the annual meeting of the American Academy of Podiatry Associations be printed in the RECORD.

There being no objection, the address was ordered to be printed in the Record, as follows:

Address by Mr. Hartke

I am pleased to be back again among many old friends, and my visit is made even more pleasurable because we share a common commitment to provide every American man, woman and child with full access to the complete spectrum of health care services which our country has to offer.

As Congress moves through its final days of the current session, there are still some rumblings that national health insurance will come before us. At the beginning of the ninty-third Congress in 1978, nothing would have made me happier, but as we near the end of this Congress, it would be a tragedy to adopt any national health insurance effort—a tragedy for the American people, and a tragedy for each of the health care professions who would be responsible for providing increased health care services.

During the past two years—in fact, for the past several years—we have seen an on-going debate between the proponents of various health insurance programs. There is not a major, organized health care interest in the United States which does not have a proposal of its own, and the debate in Congress has often involved less of merit and more of political power and influence.

If Congress acts on national health insurance this late in the session, the American people will have a patchwork program written not in committee, not on the floor of either the House or the Senate, but written in a joint House-Senate conference committee. As politics goes, that might work out well for many of us who have sponsored various national health insurance proposals. We each would be able to claim that we had some important part to play in the final product. But as a device to improve the standard of health care in our nation, I can think of no possibility which could do more harm to the American people.

THE NEED FOR NATIONAL HEALTH INSURANCE Let me assure you that I stand completely committed to the need for national health insurance. The plain fact is that many Americans cannot see a doctor when they need one. People have died this very day who might otherwise be alive if they had the money to pay for quality health care. We can argue all we want about whether there is a health care crisis in this country, but there are tens of thousands of people suffering needlessly in our country because they cannot get a foot into the doctor's door or the hospital's operating rooms.

The Federal Government has a vital role to play in assuring quality health care. That fact was clear to the American medical association when, at the time of World War One, they proposed a national health insurance plan. It was clear to those of us in Congress when we wrote the Medicare and Medicald programs and when we adopted a series of health manpower bills. Now, in 1974, the need for national health insurance is even greater.

I start with the principle that quality health care is a right possessed by every American. There may be no statement confirming that right in the words of our Founding Fathers, but good health is the foundation of every human being's life. There is not a person living on the face of this earth who does not want good health. We know what the tragedy of ill health can mean.

From the simplest cold to the most dreaded cancer, illness can strike anyone, at any time, at any age. At its very best, illness can leave us uncomfortable; at its very worst, it can kill.

Cold statistics tell us that the higher a person's income, the better chance he has for good health. And cold statistics tell us how much is lost in terms of our alling gross national product when workers are sick. But I prefer to discuss this problem in terms of human life and human happiness.

I long for the day when complicated medical machines, difficult surgical procedures, and expensive medicines will be within the reach of any American in need. Why should some kidney disease patients be dying simply because they cannot afford a dialysis machine? Or why should a hemophiliac bleed to death because he cannot afford blood-clotting medicine? We can talk all we want to about the realities of health care, but there is only one reality that counts; the only way to assure each person's right to the care provided by doctors and hospitals is to establish a national health insurance program.

It is now time that we recognized that the

It is now time that we recognized that the spectre of illness knows neither age nor income barriers. We can no longer say that only the aged and the poor need national health insurance assistance. Only the very wealthiest of Americans can rest assured that they will be able to bear the cost of any illness or any accident. The rest of us must live with the burden of worrying what will happen to ourselves and our loved ones if we become sick.

In a country which has recognized the need to guarantee that every person is well-fed and properly housed, and that no person need live in poverty because of old-age or lack of available jobs, it is ironic that it has taken so long to guarantee that every American will have access to one of the finest health care systems in the world.

The illness of any one American affects us all in very real terms. The wonders of modern medicine are for the use and benefit of us all. In that sense, you as health care practitioners perform one of the most vital social functions in our society. You play an important role in assuring and enhancing the quality of life which is so essential to the human race. It is not enough that any of us is allowed to exist on this Earth. We must have our opportunity to enjoy life and to fulfill our dreams and our ambitions. Good health is crucial to that fulfillment.

It is essential that each of the health care professions realizes its importance to the functioning of our society, and its responsibility to that society. I do not suggest for one moment that government become the sole or even the primary employer of physicians. What I do suggest is that we have a community of interest, and that we work to achieve our common objective of providing quality health care for all Americans. Whatever national health insurance plan Congress adopts, it must recognize both the need for our health care system to be fully accountable to the public and the need for health care practitioners to practice free of unnecessary governmental constraints.

Health care expenditures are on the rise. Their increase has come about from such factors as increasing utilization of services and inflation. I have seen figures which showed that middle-income workers belonging to group health insurance plans are presently paying the equivalent of one month's wages to purchase health insurance coverage.

But I have also seen figures that, by 1980, that same worker will be paying the equivalent of two months' wages for the same coverage. We must act before more millions of Americans are priced out of the health care system.

In these times of rising prices, we can afford to buy less sugar and to buy less gaso-

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lief or colds contain aspirin (e.g. Anacin, APC's, Bufferin, Excedrin) and must be avoided. Your pharmacist can suggest a nonaspirin drug which you can use for mild pain.

Do not drink excessive amounts of alcohol.

More than one or two drinks or drinking regularly can alter the effect of your anticoagu-

If you are being treated by several physicians, make sure they all know you are taking an anticoagulant.

Before having any dental work or any other surgery, inform the doctor that you are taking an anticoagulant.

Ask your pharmacist how you can obtain an anticoagulant identification wallet card.

Food fads or major changes in your eating habits, such as eating unusually large amounts of fish or leafy green vegetables (spinach), can alter your response to the anticoagulant. You should eat a normal, ballanced diet unless a special diet is prescribed

Call your physician if you are unable to eat for several days, or have prolonged diarrhea.

If you have any questions, ask the pharmacist. The pharmacy name and number are on the prescription label for your easy reference.

ANTIHISTAMINES

Antihistamines should be taken immediately after meals or with food or milk to prevent stomach upset.

This drug will increase and prolong the effects of depressant drugs. Alcohol, barbiturates and tranquilizers should be avoided or used with caution.

As this drug may cause drowsiness or dizziness or impair your coordination and judgment, use caution when operating an automobile or other dangerous machinery. Do not perform any hazardous task until you have seen what response you have to the medication.

Antihistamines may initially cause dryness of the mouth, throat and nose. Smoking will cause further irritation and should be avoided. Sugarless candy or sugarless gum can give temporary relief.

Antihistamines may interact with other drugs. Consult your pharmacist or physician before taking any other medication.

If you have any questions, ask the pharmacist. The pharmacy name and telephone number are on the prescription label for your easy reference.

DECONGESTANTS

Decongestants are often combined with antihistamines to help relieve nasal conges-tion or stuffiness and to help counteract any drowsiness.

Avoid taking decongestants late at night as they may cause difficulty in getting to sleep.

DIGITALIS

Digitalis is primarily used to treat congestive heart failure, a condition where the heart has difficulty pumping enough blood to the body tissues.

Digitalis helps correct shortness of breath and tiredness by increasing the ability of the heart to pump blood.

Carefully follow your physician's directions on the dosage of this medication. Your dose may vary during the first few weeks while your physician determines what dose is best for you.

Try to take this medication at the same time every day. Should you miss a dose, take a tablet as soon as you remember it but do not take two doses at once. Do not take extra digitalis tablets unless told to do so by your physician.

Contact your physician if you develop any

of the following problems:

An unexplained loss of appetite.

Prolonged nausea, vomiting, abdominal pain, or diarrhea.

Unexplained weakness, fatigue, drowsiness or increased shortness of breath.

A large loss or gain of weight or swollen ankles.

Blurred of flickering vision, yellow or green vision, or seeing spots or halos around objects.

A charge from previously regular heart-beats to irregular heartbeats.

A sudden unexplained decrease or increase in your pulse rate. (It is normal for exercise, work or excitement to increase the pulse rate.)

If you have any questions, ask the pharmacist. The pharmacy name and number are on the prescribtion label for your easy reference

PENICULIN (ANTIBIOTIC)

Antibiotics are prescribed as a course of treatment for a bacterial infection. Follow the directions on the label until all of the medication has been taken unless advised otherwise by your physician. Do not stoo taking your penicillin even if you begin to feel bette:

To obtain the full benefits from your penicillin you must take the drug at the correct times each day. Ask the pharmacist to help you schedule the exact times for taking your renicillin.

Penicillin is most effective if it is taken on an empty stomach and should be taken one hour before meals or two or three hours after meals.

You should take this drug with a full glass: of water to increase the absorption. Wai: at least one hour before drinking fruit juices

Be sure you are not allergic to penicilling before taking this drug.

Call your physician if you suddenly de-

velop a skin rash, itching, hives or difficulty in breathing.

If you have any questions, ask the pharmacist. The pharmacy name and telephone number are on the prescription label for easy reference.

IETRACYCLINE (ANTIBIOTIC)

Antibiotics are prescribed as a course of treatment for a bacterial infection, Follow the directions on the label until all of the medication has been taken unless advised

otherwise by your physician.

To obtain the full benefits from your tetracycline, you must take the drugs the correct times each day. Ask the pharmacist to help you schedule the exact time for tak-

ing your tetracycline.

Take your tetracycline with a ful glass of water to increase the absorption.

Tetracycline is most effective when it is taken on an empty stomach and sould be taken one hour before meals or 2 to 3 hours after meals. It may be taken with small portions of food if it produces stomach ipset.

If diarrhea occurs, don't treat ourself with other medication. Contact you phar-

macist or physician for advice.

Do not take antacids, fron tablets, hilk or dairy products within two hours of the tetracycline dose as these products decre se the absorption of the drug.

You should avoid unnecessary propaged exposure to sunlight or sunlamps as some tetracyclines may produce a photosens tivity reaction resulting in severe sunburn.

Repeated administration of tetracycline to young children or pregnant women may lead to a permanent yellow-brown discold ation to the child's teeth.

If you have any questions, ask the pharmacist. The pharmacy name and telephone number are on the prescription latel for your easy reference.

NARCOTIC ANALGESTCS

Do not exceed the dosage specified in the label as narcotics may be habit forming if used in excessive amounts for prolonged periods. Use the smallest amount of the drug which satisfactorily controls the pain.

When you first take this drug it may cause nausea or vomiting. If you feel dizzy or nauseous, you should lie down.

Take this drug with a full glass of water. It may also be taken with small amounts of

food to prevent stomach upset.

Avoid alcohol and use other depressant

drugs only as directed by your physician while taking this drug.

As this drug may cause drowsiness and impair your coordination and judgment, use caution when operating an automobile or other dangerous machinery. Do not perform any hazardous task until you have seen what response you have to the medication.

Do not rise quickly from a lying position as this may produce dizziness and fainting.

This drug may be constipating, but this effect will disappear when the drug is discontinued.

If you have any questions, ask the pharmacist. The pharmacy name and telephone number are on the prescription label for your easy reference.

SEDATIVE-HYPONOTICS

Do not increase the dosage or take this drug more frequently than directed. This drug may be habit forming if used in exces-

sive amounts for prolonged periods.

As this drug may cause drowsiness and impair your coordination and judgment, use caution when operating an automobile or other dangerous machinery. Do not perform any hazardous task until you have seen what response you have to the medication.

Avoid alcohol and use other depressant

drugs only as directed by your physician while taking this drug.

Take this drug with a full glass of water. It may be taken with small amounts of food if it produces stomach upset.

When taking this drug to help you sleep, you can expect a wait of 15 to 30 minutes after you take the drug until you begin to feel drowsy. Keep no more than a one night's supply of medication on the bedside table.

Use caution in getting up from bed during the night as the drowsiness may make walking difficult.

Contact your physician if you develop a

skin rash, frequent nightmares or a change in Sedative-hypnotic drugs may interact with

other drugs. Consult your pharmacist or physician before taking any other medica-

If you have any questions, ask the pharmacist. The pharmacy name and number are on the prescription label for easy reference.

REPORT ON PRIVACY CASE STUDY PUBLISHED

Mr. ERVIN. Mr. President, I wish to announce today the publication of a staff report by the Judiciary Subcommittee on Constitutional Rights. The report is entitled, "Drug Abuse Data Banks: Case Studies in the Protection of Privacy.

The report is a summary of the staff's recent investigation into data banks being maintained on drug abuse patients by both the Special Action Office for Drug Prevention and the Drug Enforcement Administration.

I commented on the SAODAP data bank in a speech I made to the Senate on August 1, 1973. In that speech, I worried that data being required under the program could be used to identify the drug abuse patient who was the subject of the survey. If such identification were possible, it appeared likely that drug abuse patients could be subjected to endless and severe repercussions, not only at the hands of Federal agencies, but in the private sector as well.

The data-collection program operated by DEA presented similar problems.

Fifth, requires an agency to inform an individual of his or her rights when supplying information to the agency;

Sixth, requires an agency to publish notice in the Federal Register of the existence of any system of records held by that agency so that no system will be secret:

Seventh, requires an agency to set rules for access to records, describe the routine uses of the records, establish procedures whereby an individual can amend his record, keep an accurate accounting of disclosures, and keep records in a timely, relevant and accurate manner;

Eighth, prohibits an agency from maintaining a record of political and religious beliefs or activities on an individual, unless expressly authorized by statute or by the individual himself;

Ninth, provides for certain exemptions for CIA files, law enforcement files, secret service files and statistical reporting systems; and

Tenth, provides for a civil remedy for an individual who has been denied access to his records, or whose record has been maintained and used in contravention of this act and an adverse effect results.

The legislation is far from perfect. It should be improved upon and expanded in its coverage in the 94th Congress. I believe that will occur as it did with Freedom of Information Act, and that the legislation before us is a monumental breakthrough in the field of personal privacy safeguards.

The House amendment to the Senate amendments was agreed to.

The Senate amendments as amended were concurred in.

A motion to reconsider was laid on the

PARLIAMENTARY INQUIRY

Mr. ERLENBORN. Mr. Speaker, a parliamentary inquiry.

The SPEAKER. The gentleman will state his parliamentary inquiry.

Mr. ERLENBORN. Mr. Speaker, have we reached the point of unanimous consent in the Senate amendments?

The SPEAKER. We have concurred in the Senate amendments with an amendment; but if the gentleman desires to insert his remarks, the Chair will be glad to recognize the gentleman.

GENERAL LEAVE

Mr. ERLENBORN. Mr. Speaker, I ask unanimous consent that all Members may have until the close of this session to extend their remarks on the Senate bill S. 3418.

Mr. MOORHEAD of Pennsylvania. Mr. Speaker, will the gentleman include in his request also extraneous material?

Mr. ERLENBORN. Yes, I will include a request for extraneous material.

The SPEAKER. Is there objection to the request of the gentleman from Illinois?

There was no objection.

URGENT SUPPLEMENTAL APPRO-PRIATIONS FOR 1975

Mr. MAHON. Mr. Speaker, I move to suspend the rules and pass the joint resolution (H.J. Res. 1180) making urgent supplemental appropriations for the fiscal year ending June 30, 1975, and for other purposes.

The Clerk read as follows:

H.J. RES. 1180

Resolved by the Senate and House of Representatives of the United States of America in Congress assembled, That the following sums are appropriated, out of any money in the Treasury not otherwise appropriated, for the fiscal year ending June 30, 1975, namely:

CHAPTER I

DEPARTMENT OF LABOR MANPOWER ADMINISTRATION

PROGRAM ADMINISTRATION

For an additional amount for "Program administration", \$500,000, together with \$500,000 to be expended from the Employment Security Administration Account in the Unemployment Trust Fund: Provided, That this appropriation shall become available only upon enactment into law of H.R. 16596 or similar legislation by the Ninetythird Congress.

TEMPORARY EMPLOYMENT ASSISTANCE

For financial assistance as authorized by title I of the Emergency Jobs and Unemployment Assistance Act of 1974, \$1,000,000,000 to remain available until December 31, 1975: Provided, That this appropriation shall become available only upon enactment into law of H.R. 16596 or similar legislation by the Ninety-third Congress.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

For an additional amount for "Federal unemployment benefits and allowances", including payments accruing after enactment of this appropriation under title II of the Emergency Jobs and Unemployment Assistance Act of 1974, \$2,000,000,000, to remain available until September 30, 1976: Provided, That this appropriation shall become available only upon the enactment into law of H.R. 16596 or similar legislation by the Ninety-third Congress.

ADVANCES TO THE EXTENDED UNEMPLOYMENT COMPENSATION ACCOUNT

For making repayable advances to the extended unemployment compensation account in the Unemployment Trust Fund, as authorized by section 905(d) of the Social Security Act, as amended, to remain available until September 30, 1976, \$750,000,000: Provided, That amounts for necessary advances, repayable to the general fund as provided in said section 905(d) shall first be derived from balances in the revolving fund established by section 901(e) of the Social Security Act: Provided jurther, That the Secretary of the Treasury shall make such repayable advances at such times as he may determine, in consultation with the Secretary of Labor, that the amount in the extended unemployment compensation account is insufficient for the payments required by law to be paid therefrom to States: Provided further, That this appropriation shall become available only upon enactment into law of H.R. 17597 or similar legislation by the Ninety-third Congress.

GRANTS TO STATES FOR UNEMPLOYMENT INSUR-ANCE AND EMPLOYMENT SERVICES

For an additional amount to be expended for "Grants to States for unemployment insurance and employment services" from the Employment Security Administration Account in the Unemployment Trust Fund, \$249,000,000 to remain available until September 30, 1976, which shall be available

only to the extent necessary to meet increased costs of administration resulting from changes in a State law or increases in the number of unemployment insurance claims filed and claims paid or increased salary costs resulting from changes in State salary compensation plans embracing employees of the State generally over those upon which the State's basic grant was based, which cannot be provided for by normal budgetary adjustments: Provided, That this appropriation shall be available only upon enactment into law of H.R. 16596, H.R. 17597, or similar legislation by the Ninetythird Congress.

CHAPTER II

VETERANS ADMINISTRATION

READJUSTMENT BENEFITS

For an additional amount for "Readjustment benefits", \$811,700,000, to remain available until expended.

GENERAL OPERATING EXPENSES

For an additional amount for "General operating expenses", \$500,000.

CHAPTER III

DEPARTMENT OF TRANSPORTATION

FEDERAL RAILROAD ADMINISTRATION

INTERIM OPERATING ASSISTANCE

For necessary expenses for "Interim operating assistance" under the Regional Rail Reorganization Act of 1973, \$10,200,000, to remain available until expended.

CHAPTER IV

DEPARTMENT OF AGRICULTURE COMMODITY EXCHANGE AUTHORITY

For necessary expenses to carry into effect the provisions of the Commodity Exchange Act, as amended (7 U.S.C. 1 et seq.) and Public Law 93-463, enacted October 23, 1974, including not to exceed \$200,000 for employment under 5 U.S.C. 3109, \$2,473,000.

The SPEAKER. Is a second demanded? Mr. MICHEL. Mr. Speaker, I demand a second.

The SPEAKER. Without objection, a second will be considered as ordered.

There was no objection.

The SPEAKER. The gentleman from Texas (Mr. Mahon) will be recognized for 20 minutes and the gentleman from Illinois (Mr. MICHEL) will be recognized for 20 minutes.

The Chair now recognizes the gentleman from Texas (Mr. Mahon).

Mr. MAHON. Mr. Speaker, the bill before us is an urgent supplemental appropriations bill. It is required because we have recently passed certain very important legislation which requires appropriations by this Congress in order to go into effect.

The bill provides a total of \$4.8 billion. This is slightly below the request which has been made in the Congress by the President. There are only four items here. The principal item that made it absolutely necessary that we have this supplemental is \$4 billion for additional public service jobs and extended unemployment compensation and coverage; \$1 billion for public service jobs and the remainder for extended unemployment compensation coverage or readjustment. Additional funds totaling \$812,200,000 for readjustments benefits for veterans are required as a result of legislation passed by the Congress, legislation which was passed by the Congress over the President's veto.

There is \$10.2 million for interim operating assistance to the Penn Central

December 18, 1974

Railroad under the Regional Rail Reorganization Act of 1973 and \$2,473,000 for implementation of the Commodity Futures Trading Commission Act of 1974.

There were numerous requests for additional supplementals from various sources, but it was felt that these four items were of the highest urgency and should be included in an urgent supplemental.

So, they are included in what we hope is the final appropriation bill for this session of Congress. As Members know, the Appropriations Committee works through subcommittees, and the subcommittees having jurisdiction over these matters conducted hearings, markups, and the full committee met and considered yesterday the request which is now before the House. The members of the subcommittee are prepared, as I am, to discuss these matters in more detail.

Madam Speaker, I yield 6 minutes to the gentleman from Pennsylvania (Mr. FLOOD) chairman of the Subcommittee

on Labor and Education.

Mr. FLOOD. Madam Speaker, for the Department of Labor, chapter I of the bill includes \$4 billion, of which \$249,-500,000 is derived from the unemployment trust funds. Now, this is certainly a very unusual occasion for this committee to be coming before the House in the last few days before adjournment with a supplemental appropriation of \$4 billion, but I believe the Members know as well as I what has been going on for the past several weeks and days, with respect to the new legislation for the public service jobs and for unemployment assistance.

There are two bills—the Emergency Jobs and Unemployment Assistance Act, (H.R. 16596), and, the Emergency unemployment Compensation Act, (H.R. 17597), both of which are now in the final stages of enactment. Just a few minutes ago, this House agreed to the conference report on H.R. 16596.

These bills are designed to deal with the worsening unemployment situation throughout the country. As of the present moment, 6.5 percent of the work force—about 6 million people—are unemployed.

The committee is faced with the very unfortunate circumstance of having to

appropriate funds to carry out the purpose and intent of these bills almost before the ink is dry upon both these legislative actions. But, we have no choice but to act on this appropriation this week because the legislation, for the most part, becomes effective immediately. We simply cannot wait until the next session of Congress to make these funds avail-

As I say, while the official budget documents have not yet been received, we have been advised that the President proposes a supplemental appropriation of \$4 billion to carry out this new legislation. I think the Members should know that the Labor-HEW appropriations subcommittee on yesterday afternoon, held hearings with the Department of Labor officials. We reviewed the details of the legislation and the budget request. I can let the Members know now that it was a very lengthy, very thorough examination. and most of the important questions, we believe, have been properly answered to the extent possible under the circumstances.

We believe that the amounts are adequate. Certainly, the amounts do not appear to be excessive. Perhaps some Members think the public service jobs appropriation should be higher, but the committee recommends that the House accept the budget request, especially since the \$1 billion we have already appropriated this year for public service jobs is not being fully utilized. We certainly have time in the coming months to take a closer look at what is obviously a developing situation. If something additional needs to be done, we can do it, if necessary, in the next supplemental appropriation bill.

Mr. EVINS of Tennessee. Madam Speaker, will the gentleman yield?

Mr. FLOOD. I yield to the gentleman from Tennessee.

Mr. EVINS of Tennessee. Madam Speaker, as the gentleman knows, we discussed this in full committee. There is \$4 billion in here for jobs and unemployment compensation; \$3 billion for unemployment compensation; and \$1 billion for jobs.

I do not think this is a good mix. I think it should be the other way around. I wonder, could we bring about some

changes of positions for more money for jobs and less money for unemployment compensation?

Mr. FLOOD. I think that is very unlikely. While there may be many people who would share the views of the gentleman from Tennessee, the fact is that this appropriation simply carries out legislation which has been overwhelmingly endorsed in both the House and the Senate within the past 2 weeks. This is not the time and place to discuss such questions, at this late hour and this late day, when an emergency appropriation bill is being discussed. I believe, however, that the gentleman's question deserves very careful consideration by the Congress.

In the interest of time, I will briefly summarize the committee's recommendation:

The amount of \$1 billion is for the emergency jobs program. It will provide 111,000 public service employment jobs, in addition to the 200,000 jobs which will be supported during this fiscal year with the funds which we have already appropriated.

The amount of \$2 billion is for unemployment assistance, which will provide up to 26 weeks of unemployment benefits for workers who are not otherwise eligible for benefits through regular or extended State unemployment insurance program, and extended benefits for former Federal employees, postal service employees, and ex-servicemen.

The amount of \$750 million in repayable advances to the extended unemployment compensation account. This would be used to provide 13 weeks of extended unemployment compensation and a temporary program providing an additional 13 weeks of unemployment compensation.

The amount of \$249 million for State administration of unemployment benefits and employment services.

The amount of \$1 million for Federal administration of the new programs.

Mr. Speaker, at this point I will insert in the RECORD a tabulation of the programs showing relevant comparisons of the amounts included in the bill for the Department of Labor.

The tabulation of the programs is as follows:

UFGENT SUPPLEMENTAL APPROPRIATIONS BILL, 1975 CHAPTER I-DEPARTMENT OF LABOR

Item or activity	1974 appropriation	1975 presently available	1975 proposed supplemental	Recommended in the bil
Program administration	\$71, 762, 000	1 \$66, 509, 000	\$500,000	\$500, 000
	(26, 766, 000)	(28, 165, 000)	(500,000)	(500, 000)
	2, 265, 584, 000	2, 394, 400, 000	1,000,000,000	1, 000, 000, 000
	365, 000, 000	365, 000, 000	2,000,000,000	2, 000, 000, 000
Grants to States for unemployment insurance and employment: Services Trust fund transfer Total	64, 400, 000	64, 400, 000	750, 000, 000	750, 000, 000
	(898, 400, 000)	(986, 609, 000)	(249, 000, 000)	(249, 000, 000)
Federal funds	2, 766, 746, 000	2, 890, 309, 000	3, 750, 500, 000	3, 750, 500, 000
	(925, 166, 000)	(1, 014, 774, 000)	(249, 500, 000)	(249, 500, 000)
Grand total, ch I	3, 691, 912, 000	3, 905, 083, 000	4, 000, 000, 000	4, 000, 000, 000

¹ Includes — \$1,500,000 for program administration and —\$5,600,000 for comprehensive man-power assistance contained in the supplemental appropriations bill, 1975 (H.R. 16900). This bill has not yet been enacted into law.